



## MONTHLY PIPING INTERSTITIAL MONITORING RECORD

North Dakota Department of Health

Division of Waste Management – Underground Storage Tank Program

Revision: 04/2012

Facility Name: \_\_\_\_\_

Facility Address: \_\_\_\_\_ City: \_\_\_\_\_ ND Zip Code: \_\_\_\_\_

Sump ID: \_\_\_\_\_ Type of Interstitial Monitoring (i.e., float sensor, etc.) \_\_\_\_\_

Month	OK (✓)	Alarm (✓)	Reason for Alarm (i.e., water, fuel, etc.)
January			
February			
March			
April			
May			
June			
July			
August			
September			
October			
November			
December			

**Note:** If fuel is observed in the dispenser or submersible sumps, there exists a potential leak in your piping system. The source of the fuel must be investigated and corrective action taken to address the leak. In addition, if a release of product has occurred, it must be reported to the North Dakota Department of Health's Underground Storage Tank Program at (701) 328-5166.